Date:

CHANG YONG TAEKWONDO EXAMINATION FORM

(Please print clearly)		
NAME:	PHONE:	
ADDRESS:		
DATE OF BIRTH: (MM/DD/YY):	WEIGHT:	HEIGHT:
DATE OF LAST PROMOTION:	PRESENT BEL	T:
REQUESTED BELT:	RE-TESTING:	(circle) YES / NO

In taken the promotion examination of CHANG YONG TAEKWONDO SCHOOL, I hereby agree to abide by and observe all the rules and regulations of the SCHOOL. I have made full payments of the promotion examination fee and I understand that this fee is not refundable under any circumstances. I agree to accept any grade or belt rendered by the School with complete satisfaction, neither demanding nor protesting for a higher grade or belt.

x Signature of Applicant of Parent / Guardian

Grade	Present Belt	Month	Hours Required	Fees
				Tkd
10 th Gup	White	1	10	\$60
9 th Gup	Yellow Stripe	1	13	\$60
8 th Gup	Yellow Belt	1	15	\$60
7 th Gup	Green Stripe	2	15	\$60
6 th Gup	Green Belt	3	40	\$60
5 th Gup	Blue Stripe	3	40	\$60
4 th Gup	Blue Belt	4	50	\$60
3 rd Gup	Red Stripe	4	60	\$80
2 nd Gup	Red Belt	6	80	\$100
1 st Gup	Black Stripe	5	60	\$483

Name of	Jung Shim	Jip jung	Ban Dong	Sok Do	Total
Parts	Equilibrium	Concentration	Reaction	Speed	
Taeguk					
Taeguk					
One Step					
Sparring					
Free					
Sparring					
Hand &					
Foot Tech					
Breaking					
Tech					
Terminology					_

If you have any physical or menta	al challenges please specify:
Signature of Examiner:	